

VIERS SUMMER CAMP 2010 Registration Form:

2-10



Virgin Islands
Environmental Resource Station
Lameshur Bay, St. John USVI

Tel: 340-776-6721

The Virgin Islands Environmental Resource Station (VIERS) is a facility of the University of the Virgin Islands located in the Virgin Islands National Park on the remote south side of St. John and is operated by Clean Islands International, a U.S. IRS 501(c)(3) nonprofit organized exclusively for educational, scientific and charitable purposes.

Name:

Mailing Address:

.....

Tel #:.....

Cell #:

School:

Date of Birth:

Age: Sex: Female Male

T-Shirt Size: Child: S M L XL XXL
(circle) Adult: S M L XL XXL

Swimming Ability:

Hiking Ability:.....

Special Health or Dietary Considerations:

.....

Primary Emergency Contact Name:

.....

Tel #:.....

Cell #:

Which camp do you prefer attending?

Eco-Camps (for 7 to 12 year olds):

#1: July 12-14: ___ #2: July 15-19: ___

#3: July 19-21: ___ #4: July 22-24: ___

Camps (for 13 to 16 year olds):

Ranger-In-Training Camp: July 6-9: ___

Science Camp: July 26-30: ___

NOTE: Non-VI residents:

Eco-Camp costs: \$ 280, Science Camp: \$500

Send full payment with registration.

Please attach students' proof of VI residency.

Send this form with \$30 Refundable Deposit

to: VIERS, P.O. Box 250, St. John VI 00831

VIERS LIABILITY RELEASE AND RULES AGREEMENT:

To be accepted as an overnight visitor to VIERS, each section below must be initialed by the visitor (and parent/guardian if under 21 years old) and signature(s) provided below.

LIABILITY CLAIM WAIVER: NOTE: This instrument is a waiver of your legal right to collect damages from Clean Islands International, Inc (CII), the University of the Virgin Islands (UVI), or the Virgin Islands National Park (VINP), or program sponsors in the event of your injury or death or in the event of damage, destruction, loss or theft of your property. If you do not understand this waiver, please consult an attorney. Initials: _____

In consideration for being granted permission to utilize the Virgin Islands Environmental Resource Station (VIERS) facilities, I hereby waive and relinquish any right, claim or cause of action which I or my heirs or personal representatives may in the future have against CII, UVI, and VINP or its officers, agents or employees, which may arise during the course of my stay at VIERS facilities (including transportation of any kind associated with said facilities) as a result of any injury to myself, no matter how serious and whether or not resulting in death and/or damage, destruction, loss or theft of any of my personal property. Initials: _____

MEDICAL RELEASE: I authorize VIERS staff and VINP staff to administer basic first aid if required. In case of emergency, I hereby request and authorize VIERS staff to contact any physician, hospital and health care provider to provide medical treatment promptly and with no financial responsibility to VIERS or VIERS staff whether or not a parent/guardian can be contacted and informed. I understand that VIERS is not financially responsible for medical emergency transportation by land, water or air. Initials: _____

AGREEMENT TO OBEY VIERS RULES: I assure that I will observe the rules and regulations of the Virgin Islands Environmental Resource Station (VIERS), the University of the Virgin Islands and the Virgin Islands National Park (VINP). I understand that UVI policy **prohibits smoking and open flames** (candles, etc) **in any of VIERS buildings and/or grounds.** Initials: _____

AGREEMENT TO OBEY PARK RULES: I will comply fully with: 1) restrictions on the collection of scientific specimens; 2) prohibitions against the introduction of exotic organisms into the Park; and 3) against the destruction or alternation of VINP landscapes, biota, ecosystems, and cultural resources, without prior written permission from the VINP. Initials: _____

AGREEMENT TO OBEY ALCOHOL AND DRUGS POLICY: I will comply fully with prohibitions against the consumption of alcoholic beverages by minors (under 18 years old), abuse of alcoholic beverages and the use of illegal drugs while at VIERS and in the VINP. Initials: _____

FAILURE TO OBEY: I understand that failure to obey the rules and regulations of VIERS, UVI and VINP could result in my immediate expulsion from VIERS and the VI National Park. Initials: _____

PUBLICITY AUTHORIZATION: I consent to the use of any photographs taken of myself for education and public relations purposes related to VIERS. Initials: _____

I CERTIFY THAT I HAVE READ, FULLY UNDERSTAND, AND AGREE TO THE TERMS OF THIS DOCUMENT:

Signature of Camper: _____ Date _____

Printed Name & Signature of Parent/Guardian _____ Date _____

Do you wish to donate your deposit to Friends of VIERS? YES NO